

Form IN FORMA PAUPERIS – 1 (Rev. 12/1/20, OHSD)

FILED
RICHARD W. NAGEL
CLERK OF COURT

IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF OHIO

U.S. DISTRICT COURT
SOUTHERN DISTRICT
OF OHIO-COLUMBUS

Jamal M. Bey,

2:24 CV 4077

Plaintiff(s),

Case No.

JUDGE SARGUS

-vs-

Patituce & Associates LLC,

MAGISTRATE JUDGE DEAVERS

Defendant(s)

APPLICATION AND AFFIDAVIT BY INCARCERATED PERSON
TO PROCEED WITHOUT PREPAYMENT OF FEES

**NOTICE TO PRISONERS REGARDING
PROCEEDINGS IN *FORMA PAUPERIS***

Prisoner account statement required. A prisoner seeking to bring a civil action or file an appeal without prepayment of fees or security therefor must submit a certified copy of the trust fund account statement (or institutional equivalent) for the six-month period immediately preceding the filing of the complaint or the filing of a notice of appeal. Prison Litigation Reform Act of 1995, Pub L. No. 104-131, 110 Stat. 1321, § 804(a)(1)-(3), 28 U.S.C. §1915(a)-(h). The trust fund account statement is obtained from the cashier of the prison or prisons at which the prisoner was confined during the previous six months. 28 U.S.C. § 1915(a)(2). Since an appeal is a separate action, another application to proceed without prepayment of fees or security therefor must be filed when you file a notice of appeal. A prisoner seeking habeas corpus relief is not required to file a prisoner account statement.

Filing Fees. The current fees for filing a habeas corpus petition, civil complaint, and notice of appeal are:

- Habeas Corpus Petition \$ 5.00
- Civil Complaint (IFP Denied) \$ 405.00
- Civil Complaint (IFP Granted) \$ 350.00
- Appeal \$ 605.00

AFFIDAVIT

I, Jamal M. Bey, declare that I am the (check appropriate box):

petitioner/plaintiff/movant other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of the full filing fee or costs under 28 U.S.C. § 1915, I declare that I am unable to prepay the full filing fee or the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under the penalty of perjury:

1. Are you currently incarcerated? Yes No

If "Yes", state the place of incarceration: Marion Correctional Institution

(If "No" this is the wrong form for you. You should request the Non-Prisoner Declaration in Support of Request to Proceed *In Forma Pauperis*.)

2. Do you have a work, program, status assignment or other circumstances which causes you to be paid by the prison, jail, or other custodial institution? Yes No

If "Yes", state the amount credited to you each month: \$ 20.60 /month

3. In the past 12 months have you received any money from the following sources? If so, state the total amount received.

			<u>Amount</u>
a. Business, profession or other self-employment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	\$ _____
b. Rent payments, interest or dividends	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	\$ _____
c. Pensions, annuities or Life insurance payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	\$ _____
d. Disability or workers compensation payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	\$ _____
e. Gifts or inheritances	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	\$ _____
f. Any other sources	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	\$ _____

If the answer to any of the above is “Yes”, describe each source of money and state the amount received **and** what you expect you will continue to receive.

4. Do you have **any** cash or checking or savings accounts outside the prison?

Yes No Amount \$ _____

5. Do you have a secondary savings account, such as a certificate of deposit or a savings bond, which is recorded by the prison cashier?

Yes No Amount \$ _____

6. Do you own any assets, including real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?

Yes No

If “Yes”, describe each asset and state its value:

ASSET	VALUE
Autos _____	\$ _____
(Make/Model/Year) _____	
Stocks _____	\$ _____
_____	\$ _____
Bonds _____	\$ _____
Notes _____	\$ _____
Real Estate _____	\$ _____
\$ _____ (mortgage)	
Other _____	\$ _____

7. Have you on three or more prior occasions, while incarcerated or detained in any prison, jail or other facility, brought an action in a court of the United States that was dismissed on the grounds that it was frivolous, malicious, or failed to state a claim upon which relief may be granted?

Yes

No

If "Yes" list the dismissals:

Date Dismissed	Case Name	Case Number

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury that I have submitted above a complete statement of all the assets I possess and that all of the information is true and correct.

I understand that my signature below authorizes the institution of incarceration to forward from my account to the Clerk of the Court any initial partial filing fee assessed by the Court in the amount of 20 percent of the great of the average monthly deposits to my prison account or the average monthly balance in my prison account for the six month period immediately preceding the filing of the complaint. Therefore, I authorize the institution of incarceration to forward monthly payments of 20 percent of my preceding month's income credited to my prison account until I have paid the full amount of the filing fee.

10/17/2024
DATE

Jemal Bey
SIGNATURE OF APPLICANT

Have the institution fill out the Certificate portion of this affidavit and attach a certified copy of your prison trust fund account statement from the institution(s) of your incarceration showing at least the past six months' transactions.

CERTIFICATE

(To be completed by the institution of incarceration)

I certify that the applicant named herein has the sum of \$_____ on account to his/her credit at (name of institution) _____. I further certify that during the past six months the applicant's average monthly balance was \$_____ and the applicant's average monthly deposits were \$_____. I have attached a certified copy of the applicant's prison trust fund account statement showing at least the past six months' transactions.

I further certify that the applicant does/does not have a secondary savings account(s) such as a certificate of deposit or savings bond. The secondary account(s) balance is \$_____.

DATE

SIGNATURE OF AUTHORIZED OFFICER